

LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

 167
 Lobbyist's Registration Number

Instructions

1. Print in ink or type.
2. Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70806, (225) 763-8777 or (800) 842-6630. No fee is required.
3. This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

FOR OFFICE USE ONLY
 Postmark Date: 6/25/07

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SCANNED 1070323

JUL 28 2007

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1. NAME BURGIN R. JANE By: _____
Last First MI
2. BUSINESS PHONE 985 848 6602 or 504 782 5000
3. BUSINESS ADDRESS P.O. Box 1436, Abita Springs, LA 70420
Street and No. City State Zip
- MAILING ADDRESS _____
Street and No. City State Zip
4. EMPLOYER BURGIN & ASSOCIATES
5. EMPLOYER'S ADDRESS SAME
Street and No. City State Zip
6. Have you ceased or terminated all lobbying activities requiring registration? Yes _____ No X

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization; listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name LA. AUTOMOBILE DISMANTLERS & RECYCLERS ASSOCIATION
 Address 6025 HWY 1 SOUTH, BELLEVUE, LA 70719
 Business or purpose SALVAGE

 New Representation
 Does this person pay you? YES

If No, who pays you? _____

 Terminated Representation as of _____

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2. Name _____
 Address _____
 Business or purpose _____
- New Representation
 Does this person pay you? _____
- If No, who pays you? _____
- Terminated Representation as of _____
3. Name _____
 Address _____
 Business or purpose _____
- New Representation
 Does this person pay you? _____
- If No, who pays you? _____
- Terminated Representation as of _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.



 Signature of Lobbyist

Form 601, Rev. 1/83/84